



PTO/SB/17 (07-06)

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FEE TRANSMITTAL For FY 2006 <input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Complete if Known			
		Application Number	10/520,791-Conf. #3248		
		Filing Date	January 8, 2005		
		First Named Inventor	Alexander Dömling		
		Examiner Name	S. R. Gudibande		
TOTAL AMOUNT OF PAYMENT		(\$)	905.00	Attorney Docket No.	62660(52171)

METHOD OF PAYMENT (check all that apply)

<input type="checkbox"/> Check	<input type="checkbox"/> Credit Card	<input type="checkbox"/> Money Order	<input type="checkbox"/> None	<input type="checkbox"/> Other (please identify): _____
<input checked="" type="checkbox"/> Deposit Account Deposit Account Number: <u>04-1105</u> Deposit Account Name: <u>Edwards Angell Palmer & Dodge LLP</u>				
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)				
<input checked="" type="checkbox"/> Charge fee(s) indicated below		<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee		
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17		<input checked="" type="checkbox"/> Credit any overpayments		

FEE CALCULATION**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

2. EXCESS CLAIM FEES

Fee Description	Fee (\$)	Small Entity Fee (\$)
Each claim over 20 (including Reissues)	50	25
Each independent claim over 3 (including Reissues)	200	100
Multiple dependent claims	360	180

<u>Total Claims</u>	<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>	<u>Multiple Dependent Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>
6	- 20 =	x	=			
HP = highest number of total claims paid for, if greater than 20.						
<u>Indep. Claims</u>	<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>			
1	- 3 =	x	=			
HP = highest number of independent claims paid for, if greater than 3.						

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
	- 100 =	/50	(round up to a whole number) x	=

4. OTHER FEE(S)

	Fees Paid (\$)
Non-English Specification, \$130 fee (no small entity discount)	
Other (e.g., late filing surcharge): 2253 Extension for response within third month	510.00
2801 Request for continued examination (RCE) (see 37 ...)	395.00

SUBMITTED BY			
Signature		Registration No. (Attorney/Agent)	33,860
Name (Print/Type)	Peter F. Corless	Telephone	(617) 439-4444
		Date	November 30, 2006



Application No. (if known): 10/520,791

Attorney Docket No.: 62660(52171)

Certificate of Express Mailing Under 37 CFR 1.10

I hereby certify that this correspondence is being deposited with the United States Postal Service as Express Mail, Airbill No. EV888717268US in an envelope addressed to:

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33,860
Registration Number, if applicable

(617) 439-4444
Telephone Number

Note: Each paper must have its own certificate of mailing, or this certificate must identify each submitted paper.

Fee Transmittal (1 page)

Three Month Request for Extension of Time Under 37 CFR 1.136(a) (2 pages)

Request for Continued Examination Transmittal (1 page)

Declaration Under 37 CFR 1.132 of Alexander Domling

Response

Charge \$905.00 to deposit account 04-1105



FEE SUMMARY SHEET

Transmittal -- Request for Continued Examination (RCE)

Date: November 30, 2006
Time: 3:38 PM
Docket: 62660(52171)

Filing Date: January 8, 2005
Application No: 10/520,791
Total Fee: \$ 905.00

Code	Amount	37 CFR	Fee Description	Listed on
2253	510.00	1.17(a)(3)	Extension for response within third month	Fee Transmittal (PTO SB-17)
2801	395.00	1.17(e)	Request for continued examination (RCE) (see 37 CFR 1.114)	Fee Transmittal (PTO SB-17)